

Healthcare Information Resource Center

Internet and Personal Computer Diskette Documentation

The Annual Utilization Report of Specialty Care Clinics

For Calendar Year

1999

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SPECIALTY CLINICS – 1999

GENERAL INFORMATION

The Office of Statewide Health Planning and Development (OSHPD) annually produces a data file which contains 45 data elements from the *Annual Utilization Report of Specialty Care Clinics*, as submitted by Specialty Care Clinics licensed by the State of California.

For 1999, data are presented for 664 total licensed Specialty Clinics; comprised of 6 Alternative Birthing Centers, 24 Psychology Clinics, 316 Surgical Clinics, 300 Chronic Dialysis Clinics, and 18 Rehabilitation Clinics.

OSHPD staff reviews each report and corrections are made to the data in consultation with the clinic staff. Once the reports are completed, the database is closed and made available to the public.

Data File Description

The data file (clin991s.txt) is a comma delimited text file that can be imported into spreadsheet and database software. Most spreadsheet or database programs require that you import files through their import utilities. It is suggested that you review your software's import features before you double-click the TXT data file in this package. (Double-clicking a TXT file with Windows Explorer, will only result in Wordpad or Notepad automatically opening the file and yielding nonsense with lots of commas.)

The data for each clinic is displayed on one row (line). The clinic data are in OSHPD ID Number order. (The ID Number is displayed in the first column (Column A). Because the county code is the 5th and 6th digits of the ID Number (following the constant "306" prefix), the clinics all appear in county order (1-58).

Row number 1, is a header row which provides field names for all data columns. The initial fields contain descriptive data from OSHPD files, e.g., clinic name and address, license type and status, etc., and use abbreviated English field names. Beginning in Column W (phone number), are fields of reported data from the clinics. These field names describe each data field by its respective Page-Line-Column coordinates from the *Annual Utilization Report of Specialty Care Clinics*. (A sample copy of the *Annual Utilization Report of Specialty Care Clinics* is included as Appendix B and is highly recommended that you print it and refer to it when viewing or accessing this database.)

Following the rows of individual clinic data, is a blank row, which is then followed by row 667 which contains statewide summaries. Although the individual clinic abortion counts have been replaced by asterisks; the Statewide abortion counts do appear in row 667.

If you are having difficulties processing the TXT file format, please review the Readme.txt guide that is included in this package. If you continue to have problems, contact a technical representative at Healthcare Information Resource Center (HIRC) at (916) 322-2814. Be aware that the OSHPD staff can only answer technical data questions. You must contact the software company's technical support service regarding operation of your software.

SPECIALTY CLINICS – 1999

Data Field Formats

In the Data File Specifications that follow, these data field format representations are used:

Item No.-----Each data field is assigned an item number, which is referenced consistently throughout this documentation.

Column-----Indicates the column in which the data item is located if the file is imported into a spreadsheet.

Field Title---The title of each data item that can be used as database names or spreadsheet titles. Titles are limited to 8 characters.

Data Item----Most titles represent the report page, line, and column of the data item.

Data Type---Indicates if field is TEXT, NUMERIC or CODED, as defined below:

TEXT	Alphanumeric	Alphabetic and/or numeric data, left justified, and space filled
NUMERIC	Numeric	Only numeric values, no punctuation, right justified, and left space filled
CODED	Coded data	Data is coded directly from the in house Licensing File System (LFS)
FIELD SIZE	Maximum field size.	

Data Field Definitions

The Data Field Definitions begin on page six. They define each data item, including definitions of reported code numbers. Each data field is listed by the Item Number, coined in first column of the next section (Data File Specifications).

SPECIALTY CLINICS – 1999

DATA FILE SPECIFICATIONS

This section contains the data file specifications for the data fields. For each data item, it specifies: 1) the number of the data field (Item No.); 2) the spreadsheet column reference (Column); 3) the field title (Field Title); 4) the data item's name (Description); 5) the type of data (Data Type); and 6) the size of the field (Field size).

File 1-clin99s1.txt

Begins on Page 4

SPECIALTY CARE CLINIC UTILIZATION DATA FILE SPECIFICATIONS

File (clin99s1.txt)

Item No.	Column	Field Title	Description	Data Type	Field Size
<u>Facility Information</u>					
1	A	FACNO	Facility Identification Number	Coded	9
2	B	COUNTY	County Number	Coded	2
3	C	PERMID	OSHPD Permanent ID Number	Coded	4
4	D	LICTYPE	LFS License Type	Coded	1
5	E	LICDATE	LFS First Licensed Date	Coded	8
6	F	LSTAT	LFS Status Code	Coded	1
7	G	LSTATDT	LFS Status Date	Coded	8
8	H	OSTAT	Open Status Code	Coded	1
9	I	OSTATDT	Open Status Date	Coded	8
10	J	DBAName	Facility Name DBA (on 12/31)	Text	50
11	K	DBAAddr	Facility Address (DBA)	Text	30
12	L	DBACity	Facility City (DBA)	Text	20
13	M	DBAZip	Zip Code (DBA)	Text	10
14	N	MLAttn	Facility Attention (Mailing Address)	Text	30
15	O	MLAddr	Facility Address (Mailing Address)	Text	30
16	P	MLCity	Facility City (Mailing Address)	Text	20
17	Q	MLState	State (Mailing Address)	Text	2
18	R	MLZIP	Zip Code (Mailing Address)	Text	10
19	S	HSA	HSA (Health Service Area) Codes: 01-14	Coded	2
20	T	HFPA	HFPA (Health Facility Planning Area) Codes: 0101-1424	Coded	4
21	U	COMPSTAT	Computed Status Code	Coded	3
22	V	P000103	Report Status	Coded	2
23	W	P010301	Phone Number	Text	10
<u>Dates of Operation</u>					
24	X	P020101	Dates of Operation: From (CCYYMMDD)	Text	8
25	Y	P020102	Dates of Operation: Through (CCYYMMDD)	Text	8
<u>Patients and Encounters</u>					
26	Z	P021901	Total Number of Patients (unduplicated)	Numeric	7
27	AA	P021902	Total Number of Encounters	Numeric	7
<u>Surgical Clinics</u>					
28	AB	P022501	Number of Abortions - <i>Not included in public data set</i>		
29	AC	P022601	Number of Surgical Operating Rooms	Numeric	2
30	AD	P022701	Surgical Operations Performed	Numeric	5
<u>Psychology Clinics - Numbers of Encounters by Service Type</u>					
31	AE	P022801	General Medical	Numeric	7
32	AF	P022901	Substance Abuse	Numeric	7
33	AG	P023001	Mental Health Counseling	Numeric	7
34	AH	P023101	All Other	Numeric	7

**SPECIALTY CARE CLINIC UTILIZATION
DATA FILE SPECIFICATIONS**

File (clin99s1.txt)

Item No.	Column	Field Title	Description	Data Type	Field Size
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Major Capital Expenditures

Acquisitions over \$500,000

35	AI	P030201	Market Value	Numeric	8
36	AJ	P030202	OSHDP Project Number	Text	10
37	AK	P030204	Acquisition Means	Numeric	1

Projects over \$1,000,000

38	AL	P032101	Projected Total Capital Expenditure	Numeric	9
39	AM	P032102	OSHDP Project Number	Text	10
40	AN	P032201	Projected Total Capital Expenditure	Numeric	9
41	AO	P032202	OSHDP Project Number	Text	10

Financial Data for Calendar Year

42	AP	P032301	Total Charges for all patients and 3 rd Party Payors	Signed Numeric	8
43	AQ	P032401	Other Income (Revenue)	Signed Numeric	8
44	AR	P032501	Total Operating Cost	Signed Numeric	8
45	AS	P032601	Net Operating Income (Revenue)	Signed Numeric	9

DATA FIELD DEFINITIONS

This section contains the definitions of the data items, listed by Item Number.

SPECIALTY CARE CLINIC UTILIZATION

DATA FIELD DEFINITIONS

File (clin99s1.txt)

Data Item No. Name	Definition
1. Facility Number	A nine digit facility identification number assigned by OSHPD for reporting purposes.
2. County Number	The number of the County in which the facility is located. There are 58 counties in California.
3. OSHPD Permanent ID Number	A permanent four digit facility identification number assigned by OSHPD for internal use.
4. LFS License Type	A one digit numeric code describing the type of license a facility has: 3=ABC (Alternative Birth Center) 7=Chronic Dialysis 4=Psychology 8=Rehabilitation 6=Surgical
5. LFS First License Date	An eight character code that reveals the date of the first license for a facility.
6. LFS Status Code	A one character code revealing the status of a licensed facility: Blank=License in Operating Status, C=Closed, S=License in Suspense
7. LFS Status Date	The date the facility either closed or went into suspense.
8. Open Status Code	A one character code revealing the availability of a licensed facility (Blank = use status from LFS Status Code, 0=A previous suspended licensed has been reactivated.)
9. Open Status Date	An eight character text code that reveals the date of a facility's opening.
10. Facility Name (DBA)	The name under which the facility is doing business as of December 31
11. Facility Address (DBA)	The street address of the facility doing business
12. Facility City (DBA)	The city in which the facility is doing business.
13. ZIP code (DBA)	The ZIP code in which the facility is doing business.
14. Facility Attention (Mailing Address)	A specific person who should receive any mail pertaining to the Clinic Utilization Reports.
15. Facility Address (Mailing Address)	The mailing address of a facility, which may be different than the street address of a facility's DBA (P.O. Boxes, Corporate Office, or Consulting Firms).
16. Facility City (Mailing Address)	The city in which the facility mail is delivered to.
17. Facility State (Mailing Address)	The state in which the facility mail is delivered to.
18. Facility Zip Code (Mailing Address)	The zip code in which the facility mail is delivered to.
19. Health Service Area (HSA)	Codes 01-14--A two digit numeric code denoting the HSA in which the facility is located. The HSA's geographic area, consisting of one or more contiguous counties, is designated by the Federal Department of Health and Human Services for health planning on a regional basis.
20. Health Facility Planning Area (HFPA)	Codes 0101-1424--A four digit numeric code denoting the Health Facility Planning Area (HFPA) in which the facility is located. The HFPA is a geographic subdivision of a Health Service Area (HSA).

SPECIALTY CARE CLINIC UTILIZATION

DATA FIELD DEFINITIONS

File (clin99s1.txt)

Data Item No. Name	Definition
21. Computed Status Code	<p>A maximum three character numeric code that combines information from the LFS First Licensed Date, the LFS Status Code and Date, and the Open Status Code and Date:</p> <p>C=Closed during current calendar year K=Consolidated during current calendar year NO=New (licensed this calendar year), Operating in 12/31 NS=New (licensed this calendar year), in Suspense on 12/31 NC=New (licensed this calendar year), in Suspense on 12/31 NSM=New (licensed this calendar year), in Suspense during the year, operating on 12/31 OA=Operating all year SA=In suspense all year SB=In suspense on January 1, Operating on December 31 SE=Operating on January 1, in Suspense on December 31 SM=Operating on 1/1 & 12/31, in suspense for a period during the year SBE=In suspense on 1/1 and 12/31, License reactivated for a period during the year</p>
22. Report Status	<p>A two digit numeric code that gives the status of the utilization report:</p> <p>01=License in suspense all year; no report required 02=License in suspense, data reported 03=License in suspense, non-responder 04=Clinic closed, data reported 05=Clinic closed, non-responder 06=Licensed, but not in operation 07=Clinic open, data reported (most Clinics) 08=Clinic open, non responder 09=Clinic open, partial year data reported (change of ownership) 10=Clinic open, report a combination of data from 2 (or more) owners 11=Closed, data unavailable 12=New; first licensed in 1999, data reported 13=New; first licensed in 1999, non-responder</p>
23. Phone Number	The main business phone number of the facility.
24. Dates of Operation: From (CCYYMMDD)	<p>An eight-digit numeric code (the first half of a data item) that reveals a period in a year that a facility was open. This should only be completed if the agency was newly licensed, closed, or went into suspense during the reporting year. For example, if an agency was licensed on 1/1 or after or was delicensed (closed) on 12/31 or before, it would be necessary to complete this item (Month=01 through 12, Day =01 through 31).</p>

SPECIALTY CARE CLINIC UTILIZATION

DATA FIELD DEFINITIONS

File (clin99s1.txt)

Data Item No. Name	Definition
25. Dates of Operation: Through (CCYYMMDD)	An eight digit numeric code (the last half of a data item) that reveals a period in a year that a facility was open. This should only be completed if the agency was newly licensed, closed, or went into suspense during the reporting year. For example, if an agency was licensed on 1/1 or after or was delicensed (closed) by 12/31 or before, it would be necessary to complete this item (Month=01 through 12, Day =01 through 31).
26. Total Number of Patients (unduplicated)	Patient = Individual who has had one or more encounters during the calendar year.
27. Total Number of Encounters	In general, a face to face contact between a patient and a provider of health care services who exercises INDEPENDENT JUDGEMENT in the provision of health services to the individual patient. For a health service to be defined as an encounter, the provision of the health service MUST BE RECORDED in the patient's record.
28. Surgical Clinics: Number of Abortions	Not available to the public; field shows asterisks
29. Surgical Clinics: Number of Surgical Operating Rooms (on 12/31	Total number of surgical operating rooms in a facility as of December 31.
30. Surgical Operations Performed	Surgical operation = One patient scheduling regardless of the number of procedures performed during a single surgical scheduling.
31. Psychology Clinics, Number of Encounters by Service Type: General Medical	Primary care services for acute and chronic diseases and conditions that do not fall into any other category.
32. Psychology Clinics, Number of Encounters by Service Type: Substance Abuse	Services involving alcohol and drug abuse, such as counseling, education, evaluation, and treatment, etc.
33. Psychology Clinics, Number of Encounters by Service Type: Mental Health Counseling	Services of a psychologic, sociopsychologic, or crisis-intervention nature.
34. Psychology Clinics, Number of Encounters by Service Type: All Other	Services that do not fall into any of the above categories.
35. Major Capital Expenditures, \$500,000+: Market Value	Purchase price of diagnostic or therapeutic equipment acquired by the facility during the calendar year.
36. Major Capital Expenditures, \$500,000+: OSHPD Project Number	Eight character alphanumeric OSHPD project number issued by OSHPD-Division of Facilities Development and Finance.
37. Major Capital Expenditures, \$500,000+: Acquisition Means	<div style="display: flex; justify-content: space-between;"> 1 = Purchase 3 = Donation </div> <div style="display: flex; justify-content: space-between;"> 2 = Lease 4 = Other </div>

SPECIALTY CARE CLINIC UTILIZATION

DATA FIELD DEFINITIONS

File (clin99s1.txt)

Data Item No. Name	Definition
38. Major Capital Expenditures, Projects over \$1,000,000: Projected Total Capital Expenditure	Estimated final cost of any building project the facility began during the calendar year.
39. Major Capital Expenditures, Projects over \$1,000,000: OSHPD Project Number	Eight character alphanumeric OSHPD project number issued by OSHPD-Division of Facilities Development and Finance.
40. Major Capital Expenditures, Projects over \$1,000,000: Projected Total Capital Expenditure	Estimated final cost of any building project the facility began during the calendar year.
41. Major Capital Expenditures, Projects over \$1,000,000: OSHPD Project Number	Eight character alphanumeric OSHPD project number issued by OSHPD-Division of Facilities Development and Finance.
42. Financial Data for Calendar Year: Total Charges for all patients and 3rd Party Payors	Total charges/fees collected by the facility from all patients and 3 rd Party Payors.
43. Financial Data for Calendar Year: Other Income (Revenue)	All other revenue from any other source.
44. Financial Data for Calendar Year: Total Operating Cost	The direct cost incurred in providing care to patients. Included in operating cost are: salaries and wages, rent or mortgage, employee benefits, supplies, equipment purchase and maintenance, professional fees, advertising, overhead, etc. <u>DOES NOT INCLUDE START UP COSTS,</u>
45. Financial Data for Calendar Year: Net Operating Income (Revenue)	To determine the NET OPERATING INCOME, <u>add</u> Total Charges for all patients and 3 rd Party Payors, and Other Income together. Subtract the Total Operating Cost. The <i>difference</i> is Net Operating Income.

APPENDIX A

Counties Of California

APPENDIX A

COUNTIES OF CALIFORNIA

CODE NUMBERS AND NAMES

COUNTY		COUNTY		COUNTY	
#	<u>Name</u>	#	<u>Name</u>	#	<u>Name</u>
01	Alameda	20	Madera	40	San Luis Obispo
02	Alpine	21	Marin	41	San Mateo
03	Amador	22	Mariposa	42	Santa Barbara
04	Butte	23	Mendocino	43	Santa Clara
05	Calaveras	24	Merced	44	Santa Cruz
06	Colusa	25	Modoc	45	Shasta
07	Contra Costa	26	Mono	46	Sierra
08	Del Norte	27	Monterey	47	Siskiyou
09	El Dorado	28	Napa	48	Solano
10	Fresno	29	Nevada	49	Sonoma
11	Glenn	30	Orange	50	Stanislaus
12	Humboldt	31	Placer	51	Sutter
13	Imperial	32	Plumas	52	Tehama
14	Inyo	33	Riverside	53	Trinity
15	Kern	34	Sacramento	54	Tulare
16	Kings	35	San Benito	55	Tuolumne
17	Lake	36	San Bernardino	56	Ventura
18	Lassen	37	San Diego	57	Yolo
19	Los Angeles	38	San Francisco	58	Yuba
		39	San Joaquin		

APPENDIX B

Annual Utilization Report of Specialty Clinics (blank reporting form)

ANNUAL UTILIZATION REPORT OF SPECIALTY CARE CLINICS - 1999

Surgical, Chronic Dialysis, Rehabilitation, Psychology, ABC Clinics

STATE USE ONLY	
Page 0, Line 1	
Col. 3	
STATUS	_____

Return **BY FEBRUARY 15, 2000** to:
Office of Statewide Health Planning
and Development
Accounting and Reporting Systems Section
Licensed Services Data and Compliance Unit
818 K Street, Rm. 400
Sacramento, CA 95814

Completion of this "Annual Utilization Report of Clinics" is required by Section 127285 and Section 1216 of the Health and Safety Code. Failure to complete and file this report by February 15, may result in suspension of the facility's license.

Please refer to the instructions as you complete the form. If you have any questions or need assistance in completing the form, please contact the Office at (916) 322-7422 or (916) 323-7685.

I declare the following under penalty of perjury: that I, the current administrator of this health facility, duly authorized by the governing body to act in an executive capacity; that I am familiar with the record keeping system of this facility and the records and logs are true and correct to the best of my knowledge and belief; that I have read this report and am thoroughly familiar with its contents; and that its contents represent an accurate and complete summarization from medical records and logs of the information requested.

Administrator's Name (Please Print)

Name of person completing form and /or contact person for
any follow-up questions (Please Print)

Administrator's Signature

Print Title and Department of Person Responsible for the
Report

Date

()

Area Code

Phone

Ext.

3. ()

Area Code

Clinic Phone Number

()

Area Code FAX Number

- A. **COMPLETE THIS LINE ONLY IF YOUR FACILITY HAS DELICENSED (CLOSED), WENT INTO SUSPENSE, NEWLY OPENED OR CHANGED LICENSEE/OWNERSHIP IN 1999.**

	Col. 1		Col. 2	
1. FROM				
	Month	Day	Month	Day

THROUGH

B. **PATIENTS AND ENCOUNTERS IN THE CALENDAR YEAR**

Please report the total number of individual, unduplicated patients served and the total number of encounters for these patients. Please refer to the INSTRUCTIONS for further detail.

	UNDUPLICATED PATIENTS (1)	ENCOUNTERS (2)
TOTAL, all locations under this license (Main, Mobile, Satellite, etc.) Line 19		

SURGICAL CLINICS ONLY

Table A

	Line	Number
If you provided abortion services directly at your clinic, provide the total number of abortions performed	25	
Number of surgical operating rooms on December 31	26	
Total of surgical operations performed during the calendar year	27	

PSYCHOLOGY CLINICS ONLY

Table B* Enter the number of ENCOUNTERS for the year for the following services:

BREAKDOWN OF ENCOUNTERS BY SERVICE TYPE FOR PSYCHOLOGY CLINICS:	Line	Number
General Medical	28	
Substance Abuse (alcohol and drug)	29	
Mental Health Counseling	30	
All Other	31	

*The sum of Lines 28 through 31 must equal Line 19, Col. 2 (Total Encounters)

MAJOR CAPITAL EXPENDITURES

The collection of these data in Tables C and D are mandated by Section 127285(c) of the Health and Safety Code, in order to track the effects of CON deregulation since 1984.

List each acquisition of diagnostic or therapeutic equipment costing **\$500,000** or more in Table C below.

Table C

DIAGNOSTIC/THERAPEUTIC EQUIPMENT ACQUIRED COSTING \$500,000 OR MORE			Date of Acquisition (3)	MEANS OF ACQUISITION 1 = Purchase 2 = Lease 3 = Donation 4 = Other (4)
L i n e	Market Value (1)	OSHPD PROJECT NUMBER (2)		
1				
2				
3				
4				

List the building project(s) your facility commenced during the calendar year in Table D below. List only those which require an aggregate capital expenditure over **\$1,000,000**.

Table D

PROJECTS OVER \$1,000,000 COMMENCED DURING THE CALENDAR YEAR		
L i n e	Projected Total Capital Expenditure (1)	OSHPD PROJECT NUMBER (2)
21		
22		

FINANCIAL DATA FOR CALENDAR YEAR**Table E Please round to the nearest dollar, do not enter cents!**

Lin e 23	Total Charges for all patients and 3rd party payers	\$
24	Other Income (Revenue) from other sources (enter 0 if none)	\$
25	Total Operating Cost	\$
26	Net Operating Income (Revenue)	\$